



Individual Complaint Form

Date*: 10/26/2021

18
was processed
per protocol

Complainant or Legal Representative Information: * Required Fields

Name * Valli M. Finney
Firm (if applicable)
Mailing Address * 7 Marshall St
City, State Zip * Sumter, SC 29150 Phone *
E-mail vallimfinney@yahoo.com

Name of Utility Involved in Complaint: * Duke Energy

Type of Complaint (check appropriate box below.) *

☐ Billing Error/Adjustments ☐ Deposits and Credit Establishment ☐ Wrong Rate ☐ Refusal to Connect Service
☐ Disconnection of Service ☐ Payment Arrangements ☐ Water Quality ☐ Line Extension Issue
☐ Service Issue ☐ Meter Issue
☒ Other (be specific) They claimed someone in our home was dead and took us off of averaging and another fee reduction.

Have you contacted the Office of Regulatory Staff (ORS)? * ☐ Yes ☒ No Name of ORS Contact:

Concise Statement of Facts/Complaint: * (This section must be completed. Attach additional information to this page if necessary.)

Monday, Oct. 25, 2021, we received our electric bill, the third month in a row, the amount was different. We were on averaging. This bill said actual. I called about 6 p.m. and talked to customer service who told me that someone had reported a household member dead on Sept. 10 and that's when the averaging went off. She transferred me to billing where I spoke with a Susan (spelling?) and she told me that the person in my household died in November. She said I had to talk to a special dept. between 8 a.m. and 5 p.m. I was transferred, the person disconnected. 2nd call, transferred then sent to a busy signal. 3rd call, still on hold at 9 a.m.

Relief Requested: * (This section must be completed. Attach additional information to this page if necessary.)

The company puts us back on averaging, reinstates the other discount, REQUIRES A DEATH CERTIFICATE, and, for pain and suffering, offers a cash settlement.

I UNDERSTAND AND AGREE THAT THE INFORMATION GIVEN ON THIS FORM IS PUBLIC INFORMATION THAT WILL BE PUBLISHED ON THE COMMISSION'S WEBSITE (dms.psc.gov), AND I UNDERSTAND SUCH INFORMATION MAY BE SUBJECT TO PUBLIC SCRUTINY OR FURTHER RELEASE.

Valli M. Finney
Complainant's Signature* (MUST BE SIGNED, DO NOT PRINT)

STATE OF SOUTH CAROLINA)
COUNTY OF Sumter)
)

I, Valli M. Finney
Complainant's Name * verify that I have read my complaint filed on 10/26/21
Date *

and know the contents thereof, and that said contents are true. Valli M. Finney
Complainant's Signature * (MUST BE SIGNED, DO NOT PRINT)

| Internal Use Only | |
|-------------------|------|
| Processed By | Date |
| | |
| H.E. | |



2nd

Individual Complaint Form

Date*: 11/22/2021

Complainant or Legal Representative Information: * Required Fields

Name * Valli M. Finney

Firm (if applicable)

Mailing Address * 7 Marshall St.

City, State Zip * Sumter SC 29150

Phone *

E-mail

Name of Utility Involved in Complaint: * Duk Energy

Type of Complaint (check appropriate box below.) *

- | | | | |
|---------------------------------------------------------------------------------------------------------------|------------------------------------------------------------|----------------------------------------|-----------------------------------------------------|
| <input checked="" type="checkbox"/> Billing Error/Adjustments | <input type="checkbox"/> Deposits and Credit Establishment | <input type="checkbox"/> Wrong Rate | <input type="checkbox"/> Refusal to Connect Service |
| <input type="checkbox"/> Disconnection of Service | <input type="checkbox"/> Payment Arrangements | <input type="checkbox"/> Water Quality | <input type="checkbox"/> Line Extension Issue |
| <input type="checkbox"/> Service Issue | <input type="checkbox"/> Meter Issue | | |
| <input checked="" type="checkbox"/> Other (be specific) They lied to the ORS and me about settling the issue. | | | |

Have you contacted the Office of Regulatory Staff (ORS)? * ☐ Yes ☒ No Name of ORS Contact: Not today

Concise Statement of Facts/Complaint: * (This section must be completed. Attach additional information to this page if necessary.)

One Oct. 25, 2021, I found out that Duke claimed my son (primary account holder) was DEAD. I talked to 10 different people and filed a complaint with you all. I also sent emails to the then-state CEO of Duke, and a couple of others. I was contacted by Duke and was assured and PROMISED a call back from TWO females on Nov. 5. I was promised by the ORS that the one was very trust worthy and would do what she said which was to retroactively put us back on monthly averaging. Well, it was a lie. On Saturday, Nov. 20, I received our bill in the mail. Guess what? No averaging and no calls. DUKE DID NOT DO WHAT WAS PROMISED!

Relief Requested: * (This section must be completed. Attach additional information to this page if necessary.)

I still don't know if my son is "alive" pursuant to Duke's records. I still haven't received a formal letter of apology. I still am not on averaging. I want Duke sanctioned for LYING to me and I want the above corrected IMMEDIATELY.

I UNDERSTAND AND AGREE THAT THE INFORMATION GIVEN ON THIS FORM IS PUBLIC INFORMATION THAT WILL BE PUBLISHED ON THE COMMISSION'S WEBSITE (dms.psc.gov), AND I UNDERSTAND SUCH INFORMATION MAY BE SUBJECT TO PUBLIC SCRUTINY OR FURTHER RELEASE.

Valli M. Finney

Complainant's Signature* (MUST BE SIGNED, DO NOT PRINT)

STATE OF SOUTH CAROLINA
COUNTY OF Sumter

VERIFICATION

I, Valli M. Finney
Complainant's Name *

verify that I have read my complaint filed on 11/22/21
Date *

and know the contents thereof, and that said contents are true.

Valli M. Finney

Complainant's Signature * (MUST BE SIGNED, DO NOT PRINT)

Internal Use Only

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